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FORM U-4 UNIFORM APPLICATION FOR SECURITIES INDUST REGISTRATION OR TRANSFER

U4 - INITIAL
05/17/2002

Rev. For

1. GENERAL INFORMATION

First Name: RYAN	Middle Name: JAMES	Last Name: CALLAN
Firm CRD #: 7691	Firm Name: MERRILL LYNCH, PIERCE, FENNER & SMITH INCORPORATED	Employment Date (MM/DD/YYYY) 02/01/2002
Firm Billing Code: 050291	Individual CRD #: 4469755	Individual SSN: [REDACTED]
Office of Employment Street Address 1: 701 B STREET		Office of Employment Street A
City: SAN DIEGO	State: California	Country: USA
Private Residence Check Box: If the Office of Employment address is a private residence, check this box. <input type="checkbox"/>		

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2. FINGERPRINT INFORMATION

Electronic Filing Representation

☒ By selecting this option, I represent that I am submitting or promptly will submit appropriate SRO fingerprint cards as required under applicable SRO rules.
Fingerprint card barcode

Exceptions to the Fingerprint Requirement

☐ By selecting this option, I affirm that:

- I have been employed continuously by the *filing firm* in an unregistered capacity since the last submission of a fingerprint card; or
- I am exempt from the fingerprint requirement because I meet one or more exemptions established by Rule 17f-2 under the Securities Exchange Act

Investment Adviser Representative Only Applicants

☐ I affirm that I am applying only as an investment adviser representative and that I have not also applied to become a broker-dealer representative. If the radio button/box is selected, continue below.

All Pages

- ☐ I am applying for registration only in *jurisdictions* that do not have fingerprinting requirements, or
- ☐ I am applying for registration in *jurisdictions* that have fingerprint card filing requirements and I am submitting the appropriate fingerprint card directly to *jurisdictions* for processing.

3. REGISTRATIONS WITH UNAFFILIATED FIRMS

Some *jurisdictions* prohibit "dual registration," which occurs when an individual ch maintain a concurrent registration as a representative/agent with two or more *firm* BD or IA *firms*) that are not affiliated. *Jurisdictions* that prohibit dual registration w for example, permit a broker-dealer agent working with brokerage *firm* A to maint registration with brokerage *firm* B if *firms* A and B are not owned or controlled by parent. Before seeking a dual registration status, you should consult the applicable statutes of the *jurisdictions* with which you seek registration for prohibitions on du registrations or any liability provisions.

Please indicate whether the individual will maintain a "dual registration" status by the questions in this section. (Note: An individual should answer 'yes' only if the currently registered and is seeking registration with a *firm* (either BD or IA) that is affiliated with the individual's current employing *firm*. If this is an initial application individual must answer 'no' to these questions; a "dual registration" may be initiat after an initial registration has been established).

Answer "yes" or "no" to the following questions:

- A.** Will applicant maintain registration with a broker-dealer that is not affiliated with the *filing firm*? If you answer "yes," list the firm(s) in Section 12 (Employment History).
- B.** Will applicant maintain registration with an investment adviser that is not affiliated with the *filing firm*? If you answer "yes," list the firm(s) in Section 12 (Employment History).

4. SRO REGISTRATIONS

Check appropriate SRO Registration requests.
Qualifying examinations will be automatically scheduled if needed. If yo scheduling or re-scheduling an exam, skip this section and complete S (EXAMINATION REQUESTS).

REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PCX	CBOE	CH
OP - Registered Options Principal (S4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IR - Investment Company and Variable Contracts Products Rep. (S6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GS - Full Registration/General Securities Representative (S7)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

TR - Securities Trader (S7)		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>			
TS - Trading Supervisor (S7)		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>			
SU - General Securities Sales Supervisor (S9 and S10)	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BM - Branch Office Manager (S9 and S10)		<input type="checkbox"/>	<input type="checkbox"/>					
SM - Securities Manager (S12)		<input type="checkbox"/>						
REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PCX	CBOE	CH
AR - Assistant Representative/Order Processing (S11)	<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>
IE - Limited Registered Representative (S17)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
DR - Direct Participation Program Representative (S22)	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>			<input type="checkbox"/>
GP - General Securities Principal (S24)	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
IP - Investment Company and Variable Contracts Products Principal (S26)	<input type="checkbox"/>				<input type="checkbox"/>			
FA - Foreign Associate	<input type="checkbox"/>							
FN - Financial and Operations Principal (S27)	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
FI - Introducing Broker-Dealer/Financial and Operations Principal (S28)	<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>
REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PCX	CBOE	CH
DP - Direct Participation Program Principal (S39)	<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>
OR - Options Representative (S42)	<input type="checkbox"/>			<input type="checkbox"/>				<input type="checkbox"/>
MR - Municipal Securities Representative (S52)	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>			<input type="checkbox"/>
MP - Municipal Securities Principal (S53)	<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>
CS - Corporate Securities Representative (S62)	<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>
RG - Government Securities Representative (S72)	<input type="checkbox"/>							
PG - Government Securities Principal (S73)	<input type="checkbox"/>							
SA - Supervisory Analyst (S16)		<input type="checkbox"/>						
PR - Limited Representative - Private Securities Offerings (S82)	<input type="checkbox"/>							
REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PCX	CBOE	CH
CD - Canada-Limited General Securities Registered Representative (S37)	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	

CN - Canada-Limited General Securities Registered Representative (S38)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ET - Equity Trader (S55)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AM - Allied Member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AP - Approved Person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LE - Securities Lending Representative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LS - Securities Lending Supervisor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ME - Member Exchange	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PCX	CBOE	CH
FE - Floor Employee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OF - Officer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CO - Compliance Official (S14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CF - Compliance Official Specialist (S14A)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM - Floor Member Conducting Public Business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PC - Floor Clerk Conducting Public Business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SC - Front Line Specialist Clerk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TA - Trading Assistant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____ (Paper Form Only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Rev. For									
5. JURISDICTION REGISTRATION									
Check appropriate <i>jurisdiction(s)</i> for AG (Broker Dealer Agent) and/ (Investment Adviser Representative) registration requests.									
JURISDICTION	AG	RA	JURISDICTION	AG	RA	JURISDICTION	AG	RA	JURISDICTION
Alabama	<input type="checkbox"/>	<input type="checkbox"/>	Illinois	<input type="checkbox"/>	<input type="checkbox"/>	Montana	<input type="checkbox"/>	<input type="checkbox"/>	Puerto R
Alaska	<input type="checkbox"/>	<input type="checkbox"/>	Indiana	<input type="checkbox"/>	<input type="checkbox"/>	Nebraska	<input type="checkbox"/>	<input type="checkbox"/>	Rhode
Arizona	<input type="checkbox"/>	<input type="checkbox"/>	Iowa	<input type="checkbox"/>	<input type="checkbox"/>	Nevada	<input type="checkbox"/>	<input type="checkbox"/>	Island
Arkansas	<input type="checkbox"/>	<input type="checkbox"/>	Kansas	<input type="checkbox"/>	<input type="checkbox"/>	New Hampshire	<input type="checkbox"/>	<input type="checkbox"/>	South
California	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Kentucky	<input type="checkbox"/>	<input type="checkbox"/>	New Jersey	<input type="checkbox"/>	<input type="checkbox"/>	Carolina
Colorado	<input type="checkbox"/>	<input type="checkbox"/>	Louisiana	<input type="checkbox"/>	<input type="checkbox"/>	New Mexico	<input type="checkbox"/>	<input type="checkbox"/>	South
Connecticut	<input type="checkbox"/>	<input type="checkbox"/>	Maine	<input type="checkbox"/>	<input type="checkbox"/>	New York	<input type="checkbox"/>	<input type="checkbox"/>	Dakota
Delaware	<input type="checkbox"/>	<input type="checkbox"/>	Maryland	<input type="checkbox"/>	<input type="checkbox"/>	North Carolina	<input type="checkbox"/>	<input type="checkbox"/>	Tenness
District of Columbia	<input type="checkbox"/>	<input type="checkbox"/>	Massachusetts	<input type="checkbox"/>	<input type="checkbox"/>	North Dakota	<input type="checkbox"/>	<input type="checkbox"/>	Texas
Florida	<input type="checkbox"/>	<input type="checkbox"/>	Michigan	<input type="checkbox"/>	<input type="checkbox"/>	Ohio	<input type="checkbox"/>	<input type="checkbox"/>	Utah
			Minnesota	<input type="checkbox"/>	<input type="checkbox"/>				Vermont
			Mississippi						Virginia
									Washing

Georgia	<input type="checkbox"/>	<input type="checkbox"/>	Missouri	<input type="checkbox"/>	<input type="checkbox"/>	Oklahoma	<input type="checkbox"/>	<input type="checkbox"/>	West Virginia
Hawaii	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	Oregon	<input type="checkbox"/>	<input type="checkbox"/>	Wisconsin
Idaho	<input type="checkbox"/>	<input type="checkbox"/>				Pennsylvania	<input type="checkbox"/>	<input type="checkbox"/>	Wyoming

AGENT OF THE ISSUER REGISTRATION (AI) ☐ **Indicate 2 letter *jurisdiction* (s):** _____

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6. REGISTRATION REQUESTS WITH AFFILIATED FIRMS	
Will applicant maintain registration with firm(s) under common ownership or control with the applicant's current firm?	
If "yes", Please fill in the details to indicate a request for registration with additional firms.	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

No Information Filed				
Rev. For				
7. EXAMINATION REQUESTS				
<p>Scheduling or Rescheduling Examinations Complete this section only if you are requesting an examination or continuing education session. Do not select the 65 examinations in this section if you have completed Section 5 (JURISDICTION REGISTRATION) and have selected registration in a <i>jurisdiction</i>. If you have completed Section 5 (JURISDICTION REGISTRATION), and requested a Broker Dealer Agent (AG) registration in a <i>jurisdiction</i> that requires that you pass the Series 63 examination, a Series 63 examination will be automatically scheduled for you upon submission of this Form U-4. If you have completed Section 5 (JURISDICTION REGISTRATION), and requested an Investment Adviser Representative (RA) registration in a <i>jurisdiction</i> that requires that you pass the Series 65 examination, a Series 65 examination will be automatically scheduled for you upon submission of this Form U-4.</p>				
<input type="checkbox"/> S3 <input type="checkbox"/> S4 <input type="checkbox"/> S5 <input type="checkbox"/> S6 <input type="checkbox"/> S7 <input type="checkbox"/> S7A <input type="checkbox"/> S9 <input type="checkbox"/> S10	<input type="checkbox"/> S11 <input type="checkbox"/> S12 <input type="checkbox"/> S14 <input type="checkbox"/> S14A <input type="checkbox"/> S15 <input type="checkbox"/> S16 <input type="checkbox"/> S17 <input type="checkbox"/> S21	<input type="checkbox"/> S22 <input type="checkbox"/> S24 <input type="checkbox"/> S25 <input type="checkbox"/> S26 <input type="checkbox"/> S27 <input type="checkbox"/> S28 <input type="checkbox"/> S30 <input type="checkbox"/> S31	<input type="checkbox"/> S32 <input type="checkbox"/> S33 <input type="checkbox"/> S37 <input type="checkbox"/> S38 <input type="checkbox"/> S39 <input type="checkbox"/> S42 <input type="checkbox"/> S52	<input type="checkbox"/> S53 <input type="checkbox"/> S55 <input type="checkbox"/> S62 <input type="checkbox"/> S63 <input type="checkbox"/> S65 <input checked="" type="checkbox"/> S66 <input type="checkbox"/> S72 <input type="checkbox"/> S73
Other _____ (Paper Form Only)				
OPTIONAL: Foreign Exam City _____ Date(MM/DD/YYYY) _____				
If you have taken an exam prior to registering through the CRD system please enter exam type and date taken.				
Exam type: _____ Date taken (MM/DD/YYYY): _____				

Rev. For
8. PROFESSIONAL DESIGNATIONS
Select each designation you currently maintain.
<input type="checkbox"/> Certified Financial Planner
<input type="checkbox"/> Chartered Financial Consultant (ChFC)
<input type="checkbox"/> Personal Financial Specialist (PFS)
<input type="checkbox"/> Chartered Financial Analyst (CFA)
<input type="checkbox"/> Chartered Investment Counselor (CIC)

Rev. For		
9. IDENTIFYING INFORMATION/NAME CHANGE		
First Name: RYAN	Middle Name: JAMES	Last Name: CALLAN
Suffix JR./SR., etc.:	Date of Birth (MM/DD/YYYY) [REDACTED] 1974	
State/Province of Birth CALIFORNIA	Country of Birth USA	Sex <input checked="" type="radio"/> Male <input type="radio"/> Female
Height (ft) 5	Height (in) 11	Weight (lbs) 160
Hair Color BROWN	Eye Color HAZEL	

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10. OTHER NAMES
No Information Filed

Rev. For					
11. RESIDENTIAL HISTORY					
Starting with the current address, give all addresses for the past 5 years. Report only the addresses where you lived for at least 30 days.					
From	To	Street (Do not use a P.O.Box)	City	State	Country
[REDACTED]					

Rev. For
12. EMPLOYMENT HISTORY

Provide complete employment history for the past 10 years. Include the *firm(s)* no Section 1 (GENERAL INFORMATION) and Section 6 (REGISTRATION REQUESTS WITH AFFILIATED FIRMS). Include all *firm(s)* from Section 3 (REGISTRATION WITH UNA FIRMS). Account for all time including full and part-time employments, self employ military service, and homemaking. Also include statuses such as unemployed, full-education, extended travel, or other similar statuses. Report changes as they occur.

From	To	Name of Company or Firm	Investment-Related business?	City	State	Country	Positio
02/2002		MERRILL LYNCH, PIERCE, FENNER & SMITH INCORPORATED	<input checked="" type="radio"/> Yes <input type="radio"/> No	SAN DIEGO	CA	USA	FINL AD
04/2001	01/2002	WESTERN FINANCIAL PLANNING CORP.	<input checked="" type="radio"/> Yes <input type="radio"/> No	SAN DIEGO	CA	USA	REAL ESTATE SALES
04/2001	01/2002	WESTERN FINANCIAL PLANNING CORP.	<input checked="" type="radio"/> Yes <input type="radio"/> No	SAN DIEGO	CA	USA	REAL ESTATE SALES
10/2001	01/2002	WFP SECURITIES	<input checked="" type="radio"/> Yes <input type="radio"/> No	SAN DIEGO	CA	USA	REGIST REPRES
02/2001	04/2001	UNEMPLOYED	<input type="radio"/> Yes <input checked="" type="radio"/> No	SAN DIEGO	CA	USA	NONE - UNEMP
09/2000	02/2001	WEBLINK WIRELESS	<input type="radio"/> Yes <input checked="" type="radio"/> No	SAN DIEGO	CA	USA	ACCOU MANAG
07/2000	09/2000	UNEMPLOYED	<input type="radio"/> Yes <input checked="" type="radio"/> No	TAHOE VISTA	CA	USA	NONE - UNEMP
04/1999	07/2000	PREFERRED CAPITAL	<input type="radio"/> Yes <input checked="" type="radio"/> No	CRYSTAL BAY	NV	USA	ACCOU MANAG
09/1997	04/1999	PATAGONIA	<input type="radio"/> Yes <input checked="" type="radio"/> No	RENO	NV	USA	CUSTOM SERVIC
06/1997	09/1997	UNEMPLOYED	<input type="radio"/> Yes <input checked="" type="radio"/> No	RENO	NV	USA	NONE - UNEMP
08/1992	06/1997	UNIVERSITY OF NEVADA	<input type="radio"/> Yes <input checked="" type="radio"/> No	RENO	NV	USA	STUDEN
05/1990	08/1992	MUSIC MAKER STUDIO	<input type="radio"/> Yes <input checked="" type="radio"/> No	ANAHEIM	CA	USA	SALES

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13. OTHER BUSINESS

Are you currently engaged in any other business either as a proprietor, partner, of director, employee, trustee, agent or otherwise? (Please exclude non *investment-r* activity which is exclusively charitable, civic, religious or fraternal and is recognized exempt.) If YES, Please provide the following details: the name of the other busine this business is *investment-related*, the address of the other business, the nature o business, your position, title, or relationship with the other business, the start and your relationship, the approximate number of hours/month devoted to the other bu number of hours devoted to the other business during securities trading hours, and describe your duties relating to the other business.

☐ Yes ☒ No

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14. DISCLOSURE QUESTIONS
IF THE ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS 'YES', COMPLETE DETAILS OF ALL PROCEEDINGS ON APPROPRIATE DRP(S)
REFER TO THE EXPLANATION OF TERMS SECTION OF FORM U-4 INSTRUCT EXPLANATIONS OF ITALICIZED TERMS.
Criminal Disclosure
<p>14A. (1) Have you ever:</p> <ul style="list-style-type: none"> (a) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i>? (b) been <i>charged</i> with any <i>felony</i>? <p>(2) Based upon activities that occurred while you exercised <i>control</i> o it, has an organization ever:</p> <ul style="list-style-type: none"> (a) been convicted of or pled guilty or nolo contendere ('no contest') in a domestic or foreign court to any <i>felony</i>? (b) been <i>charged</i> with any <i>felony</i>?
<p>14B. (1) Have you ever:</p> <ul style="list-style-type: none"> (a) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign or military court to a <i>misdemeanor involving</i>: investments or an <i>investment-related</i> business or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of th offenses? (b) been <i>charged</i> with a <i>misdemeanor</i> specified in 14B(1)(a)? <p>(2) Based upon activities that occurred while you exercised <i>control</i> o it, has an organization ever:</p> <ul style="list-style-type: none"> (a) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic or foreign court to a <i>misdemeanor</i> specified in 14B(1)(a)? (b) been <i>charged</i> with a <i>misdemeanor</i> specified in 14B(1)(a)?
Regulatory Disciplinary Actions
<p>14C. Has the U.S. Securities and Exchange Commission or the Commodity Futures Trading Commission ever:</p> <ul style="list-style-type: none"> (1) <i>found</i> you to have made a false statement or omission? (2) <i>found</i> you to have been <i>involved</i> in a violation of its regulations or statute (3) <i>found</i> you to have been a cause of an <i>investment-related</i> business having authorization to do business denied, suspended, revoked, or restricted? (4) entered an <i>order</i> against you in connection with <i>investment-related</i> activi (5) imposed a civil money penalty on you, or <i>ordered</i> you to cease and desis from any activity?
<p>14D. Has any other Federal regulatory agency or any state regulatory agen or foreign financial regulatory authority ever:</p> <ul style="list-style-type: none"> (1) <i>found</i> you to have made a false statement or omission or been dishonest unfair or unethical? (2) <i>found</i> you to have been <i>involved</i> in a violation of <i>investment-related</i>

regulation(s) or statute(s)?

- (3) *found* you to have been a cause of an *investment-related* business having authorization to do business denied, suspended, revoked or restricted?
- (4) entered an *order* against you in connection with an *investment-related* activity?
- (5) denied, suspended, or revoked your registration or license or otherwise, *in order*, prevented you from associating with an *investment-related* business or restricted your activities?

14E. Has any self-regulatory organization or commodities exchange ever:

- (1) *found* you to have made a false statement or omission?
- (2) *found* you to have been *involved* in a violation of its rules (other than a violation designated as a "minor rule violation" under a plan approved by U.S. Securities and Exchange Commission)?
- (3) *found* you to have been the cause of an *investment-related* business having its authorization to do business denied, suspended, revoked or restricted?
- (4) disciplined you by expelling or suspending you from membership, barring suspending your association with its members, or restricting your activities?

14F. Has your authorization to act as an attorney, accountant or federal contractor ever been revoked or suspended?

14G. Have you been notified, in writing, that you are now the subject of an

- (1) regulatory complaint or *proceeding* that could result in a "yes" answer to part of 14C, D or E? (If yes, complete the Regulatory Action Disclosure Reporting Page.)
- (2) *investigation* that could result in a "yes" answer to any part of 14A, B, C, or E? (If yes, complete the Investigation Disclosure Reporting Page.)

Civil Judicial Actions

14H. (1) Has any domestic or foreign court ever:

- (a) *enjoined* you in connection with any *investment-related* activity?
- (b) *found* that you were *involved* in a violation of any *investment-related* statute(s) or regulation(s)?
- (c) dismissed, pursuant to a settlement agreement, an *investment-related* civil action brought against you by a state or foreign financial regulatory authority?

- (2) Are you named in any pending *investment-related* civil action that could result in a "yes" answer to any part of 14H(1)?

Customer Complaints

14I. (1) Have you ever been named as a respondent/defendant in an *investment-related*, consumer-initiated arbitration or civil litigation which alleged that you were *involved* in one or more sales practice violations and which:

- (a) is still pending, or;
- (b) resulted in an arbitration award or civil judgment against you, regardless of amount, or;
- (c) was settled for an amount of \$10,000 or more?

- (2) Have you ever been the subject of an *investment-related*, consumer-initiated complaint, not otherwise reported under question 14I(1)?

above, which alleged that you were *involved* in one or more *sales practice violations*, and which complaint was settled for an amount of \$10,000 or more?

(3) Within the past twenty four (24) months, have you been the subject of an *investment-related*, consumer-initiated, written complaint, not otherwise reported under question 14I(1) or (2) above, which:

- (a) alleged that you were *involved* in one or more *sales practice violations* and contained a claim for compensatory damages of \$5,000 or more (if no damage amount is alleged, the complaint must be reported unless the firm has made a good faith determination that the damages from the alleged conduct would be less than \$5,000), or;
- (b) alleged that you were *involved* in forgery, theft, misappropriation or conversion of funds or securities?

Terminations

14J. Have you ever voluntarily *resigned*, been discharged or permitted to *resign* after allegations were made that accused you of:

- (1) violating *investment-related* statutes, regulations, rules, or industry standards of conduct?
- (2) fraud or the wrongful taking of property?
- (3) failure to supervise in connection with *investment-related* statutes, regulations, rules or industry standards of conduct?

Financial

14K. Within the past 10 years:

- (1) have you made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?
- (2) based upon events that occurred while you exercised *control* over it, has organization made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?
- (3) based upon events that occurred while you exercised *control* over it, has broker or dealer been the subject of an involuntary bankruptcy petition, or had a trustee appointed, or had a direct payment procedure initiated under the Securities Investor Protection Act?

14L. Has a bonding company ever denied, paid out on, or revoked a bond you?

14M. Do you have any unsatisfied judgments or liens against you?

Rev. For

15. SIGNATURE SECTION

Please Read Carefully

All signatures required on this Form U-4 filing must be made in this section.

A "signature" includes a manual signature or an electronically transmitted equivalent. For purposes of an electronic form filing, a signature is effected by typing a name in the designated signature field. By typing a name in this field, the signatory acknowledges and represents that the entry constitutes in every way, use, or aspect, his or her legal signature.

- 15A INDIVIDUAL/APPLICANT'S ACKNOWLEDGMENT AND CONSENT
This section must be completed on all initial or Temporary Registration form
- 15B FIRM/APPROPRIATE SIGNATORY REPRESENTATIONS
This section must be completed on all initial or Temporary Registration form
- 15C TEMPORARY REGISTRATION ACKNOWLEDGMENT
This section must be completed on Temporary Registration form filings to b receive Temporary registration.
- 15D INDIVIDUAL/APPLICANT'S AMENDMENT ACKNOWLEDGMENT AND CONSENT
This section must be completed on any amendment filing that amends any in Section 14 (Disclosure Questions) or any Disclosure Reporting Page (DRP
- 15E FIRM/APPROPRIATE SIGNATORY AMENDMENT REPRESENTATIONS
This section must be completed on all amendment form filings.
- 15F FIRM/APPROPRIATE SIGNATORY CONCURRENCE
This section must be completed to concur with a U4 filing made by another (IA/BD) on behalf of an individual that is also registered with that other firm

15A. INDIVIDUAL/APPLICANT'S ACKNOWLEDGEMENT AND CONSE

1. I swear or affirm that I have read and understand the items and instructions o and that my answers (including attachments) are true and complete to the be knowledge. I understand that I am subject to administrative, civil or criminal p give false or misleading answers.
2. I apply for registration with the *jurisdictions* and *SROs* indicated in Section 4 (REGISTRATION) and Section 5 (JURISDICTION REGISTRATION) as may be am time to time and, in consideration of the *jurisdictions* and *SROs* receiving and my application, I submit to the authority of the *jurisdictions* and *SROs* and agr comply with all provisions, conditions and covenants of the statutes, constituti certificates of incorporation, by-laws and rules and regulations of the *jurisdicti SROs* as they are or may be adopted, or amended from time to time. I further subject to and comply with all requirements, rulings, orders, directives and de and penalties, prohibitions and limitations imposed by the *jurisdictions* and *SR* to right of appeal or review as provided by law.
3. I agree that neither the *jurisdictions* or *SROs* nor any person acting on their b be liable to me for action taken or omitted to be taken in official capacity or in of employment, except as otherwise provided in the statutes, constitutions, ce incorporation, by-laws or the rules and regulations of the *jurisdictions* and *SRO*
4. I authorize the *jurisdictions* and *SROs* to give any information they may have me to any employer or prospective employer, any federal, state or municipal a any other *SRO* and I release the *jurisdictions* and *SROs* and any person acting behalf from any and all liability of whatever nature by reason of furnishing suc information.
5. I agree to arbitrate any dispute, claim or controversy that may arise between firm, or a customer, or any other person, that is required to be arbitrated und constitutions, or by-laws of the *SROs* indicated in Section 4 (SRO REGISTRATI be amended from time to time and that any arbitration award rendered agains be entered as a judgment in any court of competent *jurisdiction*.
6. For the purpose of complying with the laws relating to the offer or sale of secu commodities, I irrevocably appoint the administrator of each *jurisdiction* indica Section 5 (JURISDICTION REGISTRATION) as may be amended from time to t such other person designated by law, and the successors in such office, my at whom may be served any notice, process, pleading, subpoena or other docum action or *proceeding* against me arising out of or in connection with the offer o securities or commodities, or investment advisory activities or out of the viola alleged violation of the laws of such *jurisdictions*. I consent that any such actio

proceeding against me may be commenced in any court of competent *jurisdiction* proper venue by service of process upon the appointee as if I were a resident been lawfully served with process in, the *jurisdiction*. I request that a copy of process, pleading, subpoena or other document served hereunder be mailed to current residential address as reflected in this form or any amendment thereto

7. I consent that the service of any process, pleading, subpoena, or other document *investigation* or administrative *proceeding* conducted by the SEC, CFTC or a *jurisdiction* in any civil action in which the SEC, CFTC or a *jurisdiction* are plaintiffs, or the any *investigation* or *proceeding* by any SRO against the applicant, may be made by personal service or by regular, registered or certified mail or confirmed telegram to my most recent business or home address as reflected in this Form U-4, or an amendment thereto, by leaving such documents or notice at such address, or other legally permissible means.

I further stipulate and agree that any civil action or administrative *proceeding* by the SEC, CFTC or a *jurisdiction* may be commenced by the service of process described herein, and that service of an administrative subpoena shall be effective service, and that service as aforesaid shall be taken and held in all courts and administrative tribunals to be valid and binding as if personal service thereof had been made. [System Note: Due to a form conversion error, the preceding sentence was omitted from the electronic version of this Form U-4 for filings made through W from August 16, 1999 to October 13, 2000.]

8. I authorize all my employers and any other person to furnish to any *jurisdiction* employer, prospective employer, or any agent acting on its behalf, any information I have, including without limitation my creditworthiness, character, ability, business activities, educational background, general reputation, history of my employment with the case of former employers, complete reasons for my termination. Moreover, I authorize each employer, former employer and each other person from any and all liability of whatever nature, by reason of furnishing any of the above information, including information reported on the Uniform Termination Notice for Securities Industry Registration (Form U-5). I recognize that I may be the subject of an investigative consumer report and waive any requirement of notification with respect to any investigative consumer report ordered by any *jurisdiction*, SRO, designated entity, employer, or prospective employer. I understand that I have the right to require complete and accurate disclosure by the *jurisdiction*, SRO, designated entity, employer, or prospective employer of the nature and scope of the requested investigative consumer report.
9. I understand and certify that the representations in this form apply to all employment information for whom I seek registration as indicated in Section 1 (GENERAL INFORMATION) (REGISTRATION REQUESTS WITH AFFILIATED FIRMS) of this form. I agree to keep this form by causing an amendment to be filed on a timely basis whenever change in answers previously reported. Further, I represent that, to the extent any information previously submitted is not amended, the information provided in this form is accurate and complete.
10. I authorize any employer or prospective employer to file electronically on my behalf the information required in this form or any amendment thereto; I certify that I have reviewed and approved the information to be submitted to any *jurisdiction* or Form U-4 Application; I agree that I will review and approve all disclosure information that will be filed electronically on my behalf; I further agree to waive any objection to the admissibility of the electronically filed records in any criminal, civil, or administrative *proceeding*.

Applicant or applicant's agent has typed applicant's name under this section to attest to the completeness and accuracy of this record. The applicant recognizes that this typed name constitutes, in every way, use or aspect, his or her legally binding signature.

(All applicants must execute this page.)

Date (MM/DD/YYYY)
05/17/2002

Signature of Applicant
RYAN CALLAN
Signature 

15B. FIRM/APPROPRIATE SIGNATORY REPRESENTATIONS

To the best of my knowledge and belief, the applicant is currently bonded where r and, at the time of approval, will be familiar with the statutes, constitution(s), rule laws of the agency, *jurisdiction* or *SRO* with which this application is being filed, an governing registered persons, and will be fully qualified for the position for which a is being made herein. I agree that, notwithstanding the approval of such agency, *j* or *SRO* which hereby is requested, I will not employ the applicant in the capacity s herein without first receiving the approval of any authority that may be required b

This firm has communicated with all of the applicant's previous employers for the years and has documentation on file with the names of the persons contacted and contact. In addition, I have taken appropriate steps to verify the accuracy and com of the information contained in and with this application.

I have provided the applicant an opportunity to review the information contained h the applicant has approved this information and signed the Form U-4.

*The appropriate signatory area **must** be completed on all initial, amendment or Te Registration filings.*

The appropriate signatory area for Page 1 or Page 2 amendments consists of the d signature and name lines below.

The applicant and appropriate signatory areas for Page 3 amendments consist of t signature and name lines for the appropriate signatory below and the date, signat name lines for the applicant above.

The applicant and appropriate signatory areas for initial or Temporary Registration consist of the date, signature and name lines for the appropriate signatory below, with the attestations that precede such lines, and the date, signature and name lin applicant above, together with the ten (10) numbered attestations that precede su the applicant. For a Temporary Registration, applicant must also execute the Temp Registration Acknowledgement.

Date (MM/DD/YYYY)
05/17/2002

Signature of Appropriate Signatory
KAREN MERKER
Printed Name 

Rev. For

CRIMINAL DRP

No Information Filed

Rev. For

REGULATORY ACTION DRP

No Information Filed

Rev. For